Name:
Project:
Date:

PIQA 0.8 Quality Assurance tool for HIV prevention projects targeting People Who Inject/Use Drugs

QUALITY ASSURANCE FORM





This work is part of the Joint Action on Improving Quality in HIV Prevention (Quality Action), which has received funding from the European Union within the framework of the Health Programme.

LEGAL NOTICE



Title: PIQA 0.8 Quality Assurance Form

Authors:

Annemiek Dorgelo, CBOimpact, Solutions for Health

Cor Blom, Soa Aids Nederland

With contributions from:

Viveca Urwitz, Swedish Public Health Agency of Sweden

Marica Ferri, European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)

Anastasia Pharris, European Centre for Disease Control (ECDC)

Katrin Prins-Schiffer, Eberhard Schatz, Correlation Network

Acknowledgements: PIQA is built on the Health Promotion Effect Management Instrument Preffi 2.0. The owner of this instrument, CBO, had granted permission to Quality Action to use Preffi 2.0 for the purpose of developing PIQA.

Publication date: November 2015

Financed by: PIQA is part of Quality Action (the Joint Action on Improving Quality in HIV Prevention in Europe), which has received funding from the European Commission within the framework of the Health Programme.

Copyright: Quality Action, 2015





INTRODUCTION

PIQA is a Quality Assurance tool for HIV prevention and health promotionprojects targeting People Who Inject Drugs (PWID) or People Who Use Drugs otherwise (PWUD).

The tool consists of:

- A quality assurance form
- A user guide

You are now reading the introduction to the quality assurance form. This form helps you to assess and to improve the quality of your project. Before using this form, please read at least the Introduction (Chapter 1) and Instructions (Chapter 2) of the user guide. Read the explanations and information per topic in the user guide (Chapter 3) during use of this form.

WHAT YOU NEED TO KNOW ABOUT PIQA

- The name PIQA stands for: PI (PU) = People who Inject/use drugs + QA = Quality Assurance.
- The PIQA tool will help you to assure the quality of your HIV prevention or health promotion project(s) targeting PWID/PWUD.
- It is a new tool, based on an existing tool (Preffi 2.0), because specific guidance on the quality of HIV prevention and health promotion targeting PWID is less available.
- It proved to be useful in practice as a discussion tool to open up a dialogue on what is needed/should be improved to achieve a successful and good quality health promotion or prevention project.
- You can use the tool with the aim to assess quality and discover points for improvement for your project.
- It will also help you to decide on steps to improve your project and thus assure its quality.
- PIQA is intended to be used for prevention and health promotion projects. It can be used for projects that are intended to prevent HIV, STI, Hepatitis, TB



and other infections that are common among PWID/PWUD. It can also be used for other health promotion projects targeting PWID/PWUD.

- PIQA is intended for projects. In the PIQA tool, we use the following definition: project = a temporary initiative to achieve concrete, pre-defined results within existing conditions.
- PIQA is based on research evidence, practical experience and logic.
- The topics and questions in the quality assessment form have been shown to be important for project success with respect to prevention and health promotion.
 They are called quality indicators for health promotion and prevention projects.
- For more information see the User Guide:
 - More explanation on the aforementioned items
 - General and background information on PIQA
 - Explanation of quality indicators for prevention and health promotion
 - Definition of terms used
 - Online references to information relevant for answering the questions in the quality assurance form.

BEFORE USING PIQA: Prerequisites

Basic understanding of the concepts of health promotion: PIQA requires a basic understanding of the (quality) concepts of health promotion and prevention, and the terms and definitions used. It is therefore important to familiarise yourself with the concepts by reading the User Guide and/or include a health promotion expert in your assessment team.

Basic project management skills: there should be at least one person in the project team who has project management skills.

Access to project description/information: to be able to use this quality assurance tool, a project plan or description of the project is needed. However, it is often the case that a lot of the project information is in the head of the project manager or staff. They are an important source of information on the project. However, from the perspective of quality assessment and improvement, in the end the information should be documented in a project description. See also the User Guide: 2.2).





PIQA can be **used by professionals:** those implementing the project (such as staff from needle exchanges and social workers), by project coordinators and by representatives from the target group who know about the project.

PIQA is a self-assessment tool. However, it is most useful when it involves a range of people in the assessment process, including project team members, the target group and other key stakeholders.

Familiarity with the tool: you should familiarise yourself with the tool, before using it.

Use a knowledgeable facilitator whenever possible: not all participants in the assessment may have the aforementioned skills or knowledge, especially familiarity with public health concepts and other concepts often used in professional health promotion work. There should be at least one person or facilitator in the group who has this basic understanding and who is able to explain it to the group.

Take time to familiarise yourself with the tool when you use it *for the first time* (ca. half a day's work). As a facilitator, to explain the tool to participants in the assessment, allocate about an hour.

Before you use the tool, we advise you to:

- Read the User Guide (Introduction and Instructions).
- Have information on the project at hand.
- Decide how and with whom you will do the assessment and organise the assessment process.
- Decide whether to try to assess the project on all topics or to select relevant topics:

if you feel overwhelmed by the many topics and questions in this assurance form, you might consider assessing not all topics, but choosing a selection or just one. Be aware that the result of the exercise will not be as good as when you assess all the topics. You risk focusing on topics that in the end may not be the most important ones. Remember that the best way to assure the quality of your project is to assess <u>all</u> the topics. For the quality of your project, it is useful to have an overview of <u>all</u> the points of improvement.



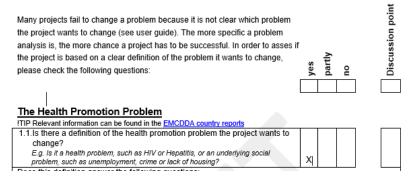
USING THE QUALITY ASSURANCE FORM

First, fill in the name of the project, the name(s) of the person(s) who are assessing the project and the date of the assessment on the front page.

Assessment questions:

You can indicate if you think your project needs improvement by scoring 'yes', 'partly' or 'no' for every indicator by placing an X or tick in the relevant box. See for example:

1. Problem Analysis



If you can answer the question with:

- Yes: the indicator is clearly described.
- Partly: the description or definition of the indicator is not complete or clear enough in your opinion/the opinion of the team.
- No: the description of the indicator is missing or not clear.
- Discussion point: indicate here which additional indicators you want to discuss with partner(s).

Always explain your choices. This enables you to review your choices at another time and enables you to explain it to others/discuss it with others.

Explanation of assessment per topic:

Use this box to explain your assessment i.e. why you think the question in this topic should be assessed 'yes', 'partly' or 'no'. This makes it possible for others to understand the rationale for your assessment. For example:



E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page x (summarize the description/answer).

1.1 Yes: a complete description of the problem the project focuses on is found on page 3 of the project description. Our focus is HIV among PWID in region X.1.2 No: we don't have information on the social problems of PWID in region X.1.3 Partly: we know how many people with HIV are PWID in region X, we don't have data on costs.

Possible issues when scoring:

- If you do not understand a part of the question, see Chapter 3 of the User Guide for explanations.
- If you do not have the information to answer the questions, see the TIPS at the end of the quality assurance form and see Chapter 3 of the User Guide for references to information and examples: underlined text in blue will take you to online information if you Control+Click on it.
- If you are not able to answer a question because:
 - information is missing: depending on the amount of missing information (partly missing or completely missing) tick 'partly' or 'no' and explain your answer in the box for explanations.
 - the question is not relevant for your project: tick 'no' and explain your answer in the box for explanations.

Overall assessment of a topic:

- If you have assessed all the questions for a topic, you can assess the quality of the topic as a whole and summarise points for improvement. You do this by counting whether the questions in the topic are mostly assessed with 'yes', 'partly', or 'no'. Besides that, it is important to look at the explanations and rationales behind the scores to see if the overall number of 'yes', 'partly' or 'no' scores really represents the quality of the project. If not, choose the option that fits best and explain (in the explanations box).
- Tick 'yes', 'partly' or 'no' for the Overall Assessment of the topic for to indicate to what extend improvements are needed to assure or improve the quality of the project.





Points of improvement:

 Use this box to formulate up to a maximum of five points for improvements on the questions that are scored 'no' or 'partly'. Start with the questions assessed 'no'.

Prioritised actions:

Use this box to formulate and prioritise three actions for improving the project, taking into consideration urgency, capacity and budget. Look at all the points for improvement you identified and start by prioritising the actions that should be taken in the short term.

Overall assessment of the project:

- If you have assessed all the topics, you can assess the quality of the project as a whole.
- Transfer the overall assessments for each topic to Part 9 of the tool.
- Assess the quality of the connection between the topics, based on the underlying indicators. The numbers in front of the indicators refer to the numbers of the 8 topics you have already completed. Their scores can be used and copied to this part of the form. See also the User Guide.
- Then check your overall impression. Is the project mostly assessed as 'yes', 'partly', or 'no'? Again, you could count the boxes marked 'yes', 'partly' and 'no' to see the extent of improvement needed. At the same time, you should consider the rationale behind the assessment of the topics and decide yourself, or discuss with the group, which is the right assessment with respect to the extent to which the project should be improved.



1. Problem Analysis

Many projects fail to change a problem because it is not clear which problem the project wants to change (see User Guide). The more specific a problem analysis is, the more chance a project has to be successful. In order to asses if the project is based on a clear definition of the problem it wants to change, please check the following questions:

The Health Promotion Problem

ITIP Relevant information can be found in the EMCDDA country reports			
1.1.Is there a definition of the health promotion problem of PWID/PWUD you			
want to change with the project?			
E.g. Is it a health problem such as HIV or Hepatitis, or risk behaviour, or a social			
problem such as lack of support, or an environmental problem, such as lack of			
services or unemployment.			
Does this definition answer the following questions:			
1.2. How does the health problem relate to social problems in the life of			
PWID/PWUD?			
Examples of social problems: poverty, unemployment, homelessness, imprisonment,			
immigration, low education levels, prostitution, discrimination, criminalisation.			
1.3.What are the consequences of the problem for PWID/PWUD in the target			
area (e.g. country/region/neighbourhood)?			
E.g. illness, disability, higher medical expenses, death, depression, problems with			
family or relationships, lower participation in work or in society.			
1.4. What are the consequences of the problem for society in the target area?			
E.g. needles on the streets, disturbance of the peace, drug related crime and			
violence, feeling unsafe.			
1.5. What and how large are the economic consequences of the problem?			
E.g. costs for care and, treatment, for harm reduction services and social support, for			
<i>policing and justice.</i> 1.6.Who, besides the people in the project, considers it a problem?	<u> </u>		
<i>E.g. PWID/PWUD themselves, professionals, politicians, representatives of society.</i>			
1.7. What is the size of the problem in the target area?	├──-	 	
<i>TIP: see the key data and statistics in the <u>EMCDDA country reports</u></i>			
1.8.Is the problem more common among certain sub-groups of PWID/PWUD?			
E.g. age, sex, ethnicity, income bracket.			
1.9. Does the problem occur more often in specific geographical areas?			
E.g. region, district, town and, at the local level, by particular areas, localities or			
streets where people gather.			
1.10. Does the problem occur within a specific timeframe(s)?			
E.g. during specific seasons, specific events during the year, specific months, or at			
specific times of day.			
Overall Assessment of Problem Analysis			
overall Assessment of Froblem Analysis			



Discussion point

partly

ou

E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page Y (summarise the description/answer).

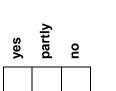
1.1 1.2 1.3 etc.			

Prioritised actions (max 3) (See page 7-9 of this form and the User Guide)
1
2
3



2. Determinants

Many projects fail to change a problem by not focusing on the proper causes (determinants). A good analysis of these causes increases the likelihood of changing the problem (see user guide 3.2).



Causes of the problem

!TIP Relevant information can be found in the <u>EMCDDA country reports</u> and <u>EMCDDA models</u> and theories

2.1.Is there a description of causes and determining factors (determinants) of the problem?
 E.g. the main underlying causes of high prevalence of HIV among young male PWID is the sharing of needles, the low price of drugs and the lack of economic perspectives.

Does this description answer the following questions:		
2.2.How do the problem and the underlying determinants influence each other? E.g. which of the causal factors or determinants make the problem bigger and which make it smaller?		
2.3.What is the magnitude of influence of these determinants? E.g. is risk behaviour more a result of lack of skills, knowledge, social norms or lack of education and harm reductions services?		
2.4. Which determinants of the problem are more prevalent among certain subgroups of PWID/PWUD? <i>E.g. among women, men, youth, migrants.</i>		
2.5.Is there evidence on the relationship between the problem and the underlying factors? <i>E.g. can you cite publications who give this evidence?</i>		
2.6.Are theoretical assumptions or models used to explain the problem and its underlying determinants?		
2.7.Is a theoretical model used to help understand the relationship between the health problem and its underlying determinants? E.g. Health Belief Model, Reasoned Action Model, Social Influence Model; see also <u>EMCCDA models& theories</u>		
2.8. Could the determinants be influenced or changed? E.g. knowledge of PWID/PWUD could be changed but national policies not.		
2.9.Is there evidence for the possibility to change determinants? E.g. can you cite publications that show this?		
2.10. Which determinants should and could be changed according to PWID/PWUD? E.g. what are their wishes, needs, motivational factors, limitations and barriers to tackle the problem?		
2.11. Which stakeholders have an influence on the problem? E.g. politicians, professionals, agencies, social services and neighbourhoods		
.12. To what extent do these stakeholders (see 2.11) perceive the problem as a problem to take action on?		
2.13. Is there interest or pressure from decision makers, public opinion, communities, or organisations to do something about the problem?		
Overall Assessment of Determinants		



Discussion point

Explanation of assessment & points for discussion

E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page Y (summarise the description/answer).

2	•	1
2	•	2

2.3

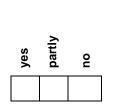
Etc.

Points for improvement (max 5)	Prioritised actions (max 3)		
(See page 7-9 of this form and the User Guide)	(See page 7-9 of this form and the User Guide)		
1	1		
2			
	2		
	2		
3			
4	3		
5			



3. Objectives

Without formulating measurable objectives, success of projects is less likely and effects cannot bet demonstrated. The objectives should fit the problem analysis, but also with the other parts (OTIC=fit between Objectives-Target group-Intervention: see User Guide 3.3).



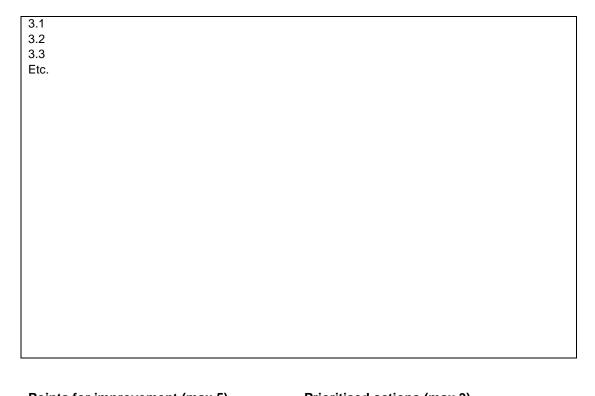
Objectives

Objectives				
TIP Relevant information and links can be found at 3.3 of the User Guide		-		
3.1.Is there a definition of the objectives of the project?				
Does this definition answer the following questions:				
3.2. Are the project objectives SMART?				
SMART=Specific, Measurable, Acceptable, Realistic and Time bound.				
3.3.Do the objectives distinguish between levels of change?				
E.g. short term/long term, different determinants.				
3.4.Is it possible to measure the desired changes?				
See also 3.3 of the User Guide				
3.5.Do the stakeholders agree with the objectives?				
Possible stakeholders to be involved are politicians, professionals,				
agencies, social services and neighbourhoods.				
3.6.Do PWID/PWUD agree with the objectives?				
E.g. do you have confirmation from them that they support the objectives?				
3.7.Do stakeholders involved, including (representatives) of				
PWID/PWUD, have sufficient expertise and authority to help				
achieve the objectives?				
E.g. professional skills to lead a project, advocacy skills, skills to reach out				
the target group, skills of PWID/PWUD themselves.			-	
3.8. Are the objectives realistic within the timeframe of the project?				
E.g. is it possible to achieve them in a month, a year, three years.				
3.9. Are the objectives realistic, considering the available resources?				
E.g. budgets, available staff, support.				
3.10. Do the chosen objectives fit with the health problem analysis?				
A classic mistake is that the objective is set for a determinant other than the				
determinant that actually causes the problem: E.g.to increase police				
presence, when the actual underlying cause is poverty among PWID/PWUD.				
Overall Assessment of Objectives				
			1	L



Discussion point

E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page Y (summarize the description/answer).

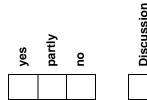


Points for improvement (max 5)	Prioritised actions (max 3)
(See page 7-9 of this form and the User Guide)	(See page 7-9 of this form and the User Guide)
1	1
2	
3	2
4	
5	3



4. Target group(s)

For a project to be successful it must focus on the right target group and the project must be appropriate for the target group. This means the project has to take the characteristics of the target group into account.





PWID/PWUD target group and target area

!TIP Relevant information and links can be found at 3.4 of the User guide 4.1 Is there a definition of the (intermediate) PWID/PWUD-target group the project focuses on? E.g. male PWID/PWUD living with HIV in the20-45 age group, in neighbourhood X of the city of Y; or female PWID/PWUD sexworkers active in car park X in city Y. Does this definition answer the following questions: 4.2 Which characteristic has the selected (intermediate) PWID/PWUD target group? Target group background: e.g. age, sex, socio-economic status, cultural or religious background, knowledge, beliefs, desires, motivations. Intermediate target group background: e.g. size, age, qualification, profession, educational level, organisational structure and norms. 4.3 In which specific geographical area are the selected PWID/PWUD located? E.g. neighbourhood X in the city of Y; street X in city Y, location X in region Y. 4.4 Which concrete figures and data support the choice for this specific target group within PWID/PWUD? See also the answers on topics 1.2 and 2.4 4.5 Are the PWID/PWUD target group selection and description in line with the views of the intermediate target group? E.g. do you have confirmation form them that this is the case? 4.6 Are target group selection and description in line with the views of PWID/PWUD themselves? E.g. have they been consulted? 4.7 Do the described problem, determinants and objectives fit with the selected PWID/PWUD target group and the selected intermediary target group? OTIC; Objectives-Target group-Intervention Combination: see 3.3 of the User Guide **Overall Assessment of Target Group**



E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page Y (summarise the description/answer).

	4.1			
	4.1 4.2 4.3 Etc.			
	4.3			
	Etc.			
I				
I				
L				

Points for improvement (max 5) (See page 7-9 of this form and the User Guide)	Prioritised actions (max 3) (See page 7-9 of this form and the User Guide)
1	1
2	
	2
3	
4	
	3
5	





a certain effect. The better planned the design of this intervention, the higher the change or success will be.

Health promotion/prevention intervention method

!TIP Use the information on the 7 key interventions at 1.2 of the User Guide and on Intervention Development at 3.5 of the User Guide

5.1 Is there a definition of the intervention methods?		
E.g. peer educators who teach PWID/PWUD about the risks of HCV or:		
storytelling of PWID/PWUD about their life choices to increase awarenes	s or:	
professionals teaching knowledge and skills to PWID/PWUD to increase	healthy	
food intake via outreach activities.		
Does this definition answer the following questions:		
5.2 Are the intervention method(s) suitable to achieve the object	tives?	
OTIC: see 3.3 of the User Guide		
5.3 Are the intervention method(s) effective?		
E.g. do you have references or explanations on earlier successes/e		
5.4 What evidence is used that supports the effectiveness of the	e l l	
chosen intervention method(s)?		
E.g. theories, published research, experience from practice.		
5.5 Will the intervention method(s) described be effective in this		
particular situation?		
E.g. is it explained that the method(s) make sense in this situation?		
5.6 Are one or more of the following (effective) techniques used	to	
reach PWID/PWUD, e.g. public communication channels,		
motivational interviewing, peer education, community-based	1	
outreach, social media, targeted services, services integrate		
general health care or general social services?		
See also the 3.5 of the User Guide		
5.7 Are parts of an integrated approach used in the project?		-
See the 7 key interventions in the 1.2 of the User Guide		
5.8 Does the project have connections with other components (key	
interventions) that are not covered by the project ?		
E.g. do you know which are available and where, have you made co	ontact	
with them?		
5.9 Is referral arranged between the project and other component	nts (key	
interventions) in the field?		
E.g. do you provide referral to vaccinations or drug dependence trea	atment?	
5.10 Are stakeholders and PWID/PWUD involved in the developm	ment of	
the intervention?		
For participatory methods see the <u>PQD-tool</u>		
5.11 Is it agreed which stages of the intervention PWID/PWUD sh	hould	1
be involved in?		
E.g. collecting information, developing the intervention, testing met	thods,	
implementing methods.		
5.12 Does the intervention fit with the lives and preferences of		1
PWID/PWUD?		
E.g. did you consult them on that?		



5.13 Is this fit supported by evidence from pre-tests, theory and/or earlier			
experiences?			
5.14 Do PWID/PWUD perceive the intervention as compatible with their			
values and norms?			
E.g. did you consult them on that?			
5.15 Does the project organisation show sufficient understanding of the			
values and social norms of PWID/PWUD?			
E.g. PWID/PWUD work in the project, staff interacts frequently with			
PWID/PWUD.			
5.16 Has timing, intensity and duration of the intervention been			
considered in the planning of activities?			
E.g. is a method applied once or several times, is application taking 5			
minutes, 1 hour or 1 day, is application carried out over a week,one month,			
a year or longer?			
5.17 Is the timing of the intervention appropriate according to the different stakeholders?			
E.g. did you consult potential stakeholders such as: politicians, professionals, agencies, social services and neighbourhoods?			
5.18 Is information from research or practice used to decide on the		-	
optimum duration, intensity and timing to reach the intervention			
goals?			
E.g. it appears from practice that PWID can be reached best in the evening			
at the needle exchange.			
Overall Assessment of Intervention Method			



E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page Y (summarise the description/answer).

5.1			
5.2			
5.3			
5.1 5.2 5.3 Etc.			
L			

Points for improvement	Prioritised actions
(See page 7-9 of this form and the User Guide)	(See page 7-9 of this form and the User Guide)
1	1
2	2
	2
3	
	3
4	
5	



6. Implementation

Discussion point Good planning of the implementation of the intervention methods increases the success of the project. The implementation strategy should aim to integrate partly changes into the daily work and life of the yes 2 (intermediate) target group. Implementation strategy !TIP Use the information at 3.6 of the User Guide 3.6 6.1 Is there a description of the implementation strategy for the intervention(s) of the project? See the explanation of terms at 3.6 of the User Guide. Does this description answer the following questions: 6.2 Is it likely that the intervention(s) will reach PWID/PWUD or intermediaries? E.g. at the needle exchange, peer educators will provide PWID with healthy food and information. 6.3 Are the implementation objectives SMART? SMART=Specific, Measurable, Acceptable, Realistic, Time bound. 6.4 Have needs, motivation, knowledge and capacity of the PWID/PWUD been considered with respect to implementation? E.g. have you consulted them on your implementation plan? 6.5 Do PWID/PWUD participate in the implementation phase of the project? E.g. as peer educators to reach out to the target group. 6.6 Have needs, motivation, knowledge and capacity of the intermediaries (professionals) been considered with respect to implementation? E.g. have you consulted them on your implementation plan? 6.7 Does the intermediate target group participate in the implementation phase? E.g. Staff of social services in the area are invited to discuss and help with disseminating information about a new peer support project. 6.8 Is evidence used to support the effectiveness of the chosen implementation strategy? E.g. can you cite publications that support the chosen strategy? 6.9 Are monitoring and feedback planned at particular points in time with respect to implementation? E.g. each month/half year we take stock of progress in implementation. 6.10 Will the project be adjusted based on the results of feedback and monitoring? E.g. who will make decisions on adjustments, when and how? Overall Assessment of the Implementation Strategy



E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes' because a complete description or a clear answer to the question is available in document X page Y (summarise the description/answer).



Prioritised actions (max 3)
(See page 7-9 of this form and the User Guide)
1
2
3



7. Evaluation

Eva	luation				ţ	
beer beer	nod evaluation provides feedback on whether activities have in carried out as planned and whether the objectives have in achieved. This is important information for the project, but for stakeholders.	yes	partly	ои	Discussion point	אל ווסופפאאפול
<u>E</u> va	luation strategy					
	Use the information at 3.7of the User Guide					
7.1	Is development of the project supported by a separate description					
	of the evaluation (evaluation plan)?					
Does	s this description answer the following questions:					
7.2	Is it clear when the project is considered successful?					
	E.g. is there a clear definition of success?					
7.3	Do all stakeholders involved agree with this definition of success?					
	E.g. have you consulted them on what they see as success?					
7.4	Can the success of the project be proven bases on the given					
	definition of success?					
	E.g. what measurable signs are indications of success?					
7.5	Is the evaluation type required to answer these questions described?					
	See 3.7 of the User Guide for an explanation of evaluation types.					
7.6	Is it likely that the desired change is actually caused by the intervention(s) of the project?					
	E.g. can you make a link between the implementation of the project and the desired change?					
7.7	Are there scheduled times for collection, analysis and reports of evaluation data?					
7.8	Will the results be communicated to the different stakeholders and PWID/PWUD?					
7.9	Are times scheduled with project members, PWID/PWUD and					
	stakeholders for adjustment of the project based on the evaluation results?					
Ove	erall Assessment of Evaluation Strategy					
			1	1		



E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or a clear answer to the question is available in document X page Y (summarise the description/answer).

Points for improvement (max 5)	Prioritised actions (max 3)
Etc.	
7.3	
7.1 7.2	

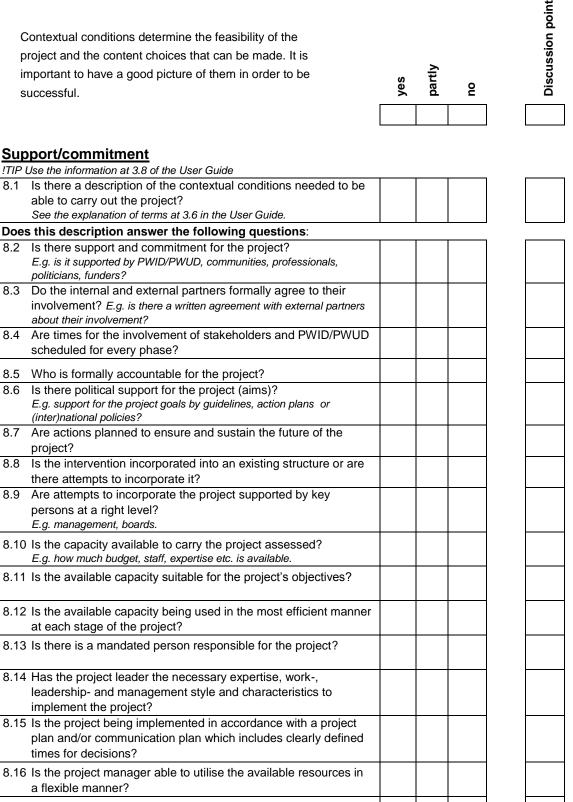
Points for improvement (max 5)	Prioritised actions (max 3)
(See page 7-9 of this form and the User Guide)	(See page 7-9 of this form and the User Guide)
1	1
2	
3	2
4	
5	3



8. Contextual factors

Contextual conditions determine the feasibility of the project and the content choices that can be made. It is successful.

8.17 Does the project manager ensure that the expertise within the





project staff is being kept up to date?			
Overall Assessment of Support/Commitment			

E.g. Assessed 'No' because the topic is not described; the question not answered. Or: Assessed 'Partly' because the description or answer is not complete or clear enough (missing or unclear is....). Or: Assessed 'Yes 'because a complete description or an clear answer to the question is available in document X page Y (summarise the description/answer).

8.1	
8.2	
8.3	

Etc.

 Points for improvement (max 5) (See page 7-9 of this form and the User Guide)
 (See page 7-9 of this form and the User Guide)

 1. ...
 1. ...

 2. ...
 2. ...

 3. ...
 2. ...

 4...
 3. ...

 5...
 3. ...

Prioritised actions (max 3)



9. Overall Assessment

If you have assessed all the clusters you can now asses the project as a whole. See 2.3 of the User Guide for instructions. In this section you also perform an additional check on OTIC: the Objectives-Target group-Intervention Combination. This gives you an overview of points for improvement.

1	Problem analysis			
2	Determinants			
3	Objectives			
4	Target group			
5	Intervention development			
6	Implementation			
7	Evaluation			
8	Contextual factors			
9	OTIC: are all the former topics well connected? First perform the additional check on OTIC below. Then us this to assess the overall quality of OTIC here.			
	Overall Assessment of Project			

An additional check on OTIC (the Objectives – Target Group-Intervention Combination). Instruction: first insert below the answers you have given on the following questions earlier in the form. Then use this to assess the overall quality of OTIC and score it at No 9 above.		
2.2 How do the problem and the underlying determinants influence each other?		
3.10 Do the chosen objectives fit with health problem analysis?]	
4.7 Do the problem described, determinants and objectives fit with the PWID/PWUD target group and intermediary target group selections?		
5.2 Are the intervention method(s) suitable for achieving the objectives?]	
6.2 Is it likely that the intervention will reach PWID/PWUD or intermediaries?		
7.6 Is it likely that the desired change is actually caused by the intervention(s) of the project?		
8.4 Are times for the involvement of stakeholders and PWID/PWUD scheduled in every phase?]	
8.11 Is the available capacity suitable for the project's objectives?]	



Discussion point

partly

0 U

yes

See also page 8 of this Quality Assurance Form

Points for improvement (max 5) (See page 7-9 of this form and the User Guide) Prioritised actions (max 3) (See page 7-9 of this form and the User Guide) 1. ... 1. ... 2. ... 2. ... 3. ... 3. ... 4. ... 3. ...



After using the tool, we advise you to:

- Formulate an action plan based on the priorities and actions you formulated in this quality assurance form
- Involve stakeholders in implementing this action plan
- Include in this plan the repetition of the assessment process (frequency to be discussed with project partners).

If you feel overwhelmed by the feedback the assessment provides – maybe because it shows that many aspects of the project need improvement – please be aware that you do not have to take them all up at once. Discuss with stakeholders which need priority and are feasible to implement. In order to choose the best priorities for improving the project, please use the overall assessment form.

In order to improve your project, some tips are provided based on previous experiences with the tool. See the 2.5 in the User Guide.

